R KOFEE	1 () () () () () () () () () (CLAIMS AS FILED - PART I (Column 1) (Column 2)				OTHER THAN OR SMALL ENTITY		
IC FEE	NUMBER FILED	NUMBER E	XTRA .	RATE	FEE		RATE	FEE
					395.00	OR		790.0
AL CLAIMS		us 20 *		x\$11=		OR:	x\$22=	648
PENDENT CLAIM	C. C. C.	nus Se	2,5	x41=.		OR.	x82=	
	IT CLAIM PRESENT			+135=		OR.	+270=	
ie dilerence in colum	en' i le lines Brain paro, cinter 10	in column 2		TOTAL		OR .	TOTAL	
医感觉性脱结性 统 絕	LAIMS AS AMENDÉ (Column 1)	D - PART II (Column 2)	(Calumn 3)	SMALL	ENIIIY	OR	OTHER	THAN ENTITY
R	CLAIMS IEMAINING AFTER MENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADOI- TIONAL FEE		RATE	ADDI TIONA FEE
Total	2.2	-56		x\$11=		OR	x\$22=	
Independent	1 Mires	-3		x41="-		OR	x82=	3
FIRST PRESE	NTATION OF MULTIPLE	DEPENDENT CLA	M	+135=		OR	•270 =-	
	(Column 1)	(Column 2)		TOTAL OUT. FEE	- 12 S	or a	TOTAL DOTT. FEE	
	CLAIMS EMAINING AFTER KENDMENT	HIGHEST NÚMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	PATE	ADDI- TIONAL FEE		RATE	AODI TIONA FEE
Total	Minus			x\$11=	A STATE OF	OR	x\$22±	
Independent	Minus			x41=		OR	x82=	
FIRST PRESE	NTATION OF MULTIPL	E DEPENDENT CLA	VM.	+135=		OR	+270=	
	(Column 1)	(Column 2)	(Column 3)	TOTAL DOT: FEE		OR ,	TOTAL VOOIT, FEE	
	CLAIMS TEMAINING AFTER MENOMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADO TION FEE
Total	Minus			x\$11 =		OR	x\$22 =	
Independent *	Minus			x41= :		OR	x82=	